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M&C Ref. RPH.P52751US

PATENT (US)

Attorney Docket No.: _____

COMBINED DECLARATION AND POWER OF ATTORNEY (ORIGINAL, DESIGN, NATIONAL STAGE OF PCT)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Title: OPTICAL FLOW ESTIMATION METHOD

the specification of which

(a) ___ is attached hereto.

(b) ___ was filed on _____ as ___ Serial No. _____ or ___ Express
Mail No. _____, as Serial No. not yet known, and was amended on _____ (if
applicable).

(c) ___ was described and claimed in PCT International Application No. PCT/EP2004/051325
filed on 1 July 2004 and amended under PCT Article 19 on _____ (if any).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(d) ___ no such application have been filed.

(e) such applications have been filed as follows.

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC §119		
GB	0315412.7	2 July 2003	<input checked="" type="checkbox"/>	Yes	No
			<input type="checkbox"/>	Yes	No
			<input type="checkbox"/>	Yes	No
			<input type="checkbox"/>	Yes	No

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POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with the Customer Number listed below to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

43076

Direct Correspondence To:

The address associated with the above-mentioned customer number.

Direct Telephone Calls To:

Name: Mark D. Saralino
Tel. No: 216/621-1113
Fax No. 216/621-6165

The undersigned to this declaration and power of attorney hereby authorizes the U.S. attorney(s) named herein to accept and follow instruction from

Name(s) of authorized representation: Mr. Richard Harding, Marks & Clerk

Address: 4220 Nash Court, Oxford Business Park South, Oxford OX4 2RU United Kingdom

as to any actions to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney(s) and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorney(s) will be so notified by the undersigned.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued therein.

Full name of sole or first inventor Miguel COIMBRA

Inventor's signature Miguel COIMBRA

Date 17/12/2005 Country of Citizenship Portuguese

Residence Vila Nova de Gaia, Portugal

Post Office Address Rua Clube dos Cacadores, 322, 4430-057 Vila Nova de Gaia, Portugal

Full name of second inventor, if any Michael Evan DAVIES

Inventor's signature _____

* SEE

Date _____ Country of Citizenship British

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Full name of sole or first inventor Miguel COIMBRA
Inventor's signature _____

Date _____ Country of Citizenship Portuguese
Residence _____ Vila Nova de Gaia, Portugal

Post Office Address _____ Rua Clube dos Cacadores, 322, 4430-057 Vila Nova de Gaia, Portugal

Full name of second Inventor, if any Michael Evan DAVIES
Inventor's signature _____

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